

REMARKS

Claims 1-11, 13-17, 19-21 and 23-27 are currently pending. Claims 1-4, 21,23,24,26 and 27 drawn to hepatitis are considered elected. Claims 5-11, 13-17,19, 20 and 25 are withdrawn from further consideration pursuant to 37 CFR 1.142(b) as being drawn to a non elected species. Claims 12, 18 and 22 have been cancelled.

Claims 1 and 21 were objected to for some informalities. Applicant has made the appropriate corrections by amendments.

Claims 1-4, 21, 23, 24, 26 and 27 were rejected under 35 USC 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

In response, applicant has made all of the appropriate amendments and thanks the Examiner for helpful suggestions.

Claims 1-4, 21, 23, 24, 26, and 27 were rejected under 35 U.S.C. 102(b) as being anticipated by Adlassnig et al. (Artificial Intelligence in Medicine, (1995) Vol 7. pages 1-24) for reasons stated in previous Action. The Action suggests that applicant's arguments to distinguish the reference were not incorporated in the claims. (*"none of the references have the distinguishing feature that the algorithm is run entirely by the computer and an external operator or technician cannot interfere with it"*).

In response, applicant has amended claim 1 to include the limitation. No

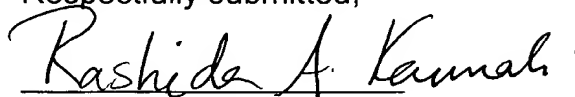
new matter is added because the present algorithm is fully run by the computer and does not require an operator, and the algorithm selects at the first stage, only tests relevant to the diagnosis of a specific suspected disease, irrespective of the tests ordered by a physician. See page 2, line 15 to page 3 line 9 of the specification.

This limitation has important implications in making the health system cost effective. This is because physicians usually order unnecessary tests, sometimes unrelated to the diagnosis of a suspected disease, usually under the guise of "routine health check-up". The algorithms developed in present invention prevent the unnecessary tests and stop an operator from overriding the algorithm.

Applicant has made a diligent effort to place this application in condition for allowance and notice to the effect that amended claims 1-4, 21, 23, 24, 26 and 27 drawn to hepatitis are in condition for allowance is earnestly solicited.

In addition, upon allowance of these generic claims, Applicant requests that withdrawn claims 5-11, 13-17, 19, 20 and 25 be reinstated as being drawn to non-elected species pursuant to 37CFR 1.142(b) and be allowed.

Respectfully submitted,



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